DATE: October 17, 2016

TO: School Administrators, Guidance Counselors & Community Leaders

FROM: Greater Lansing Area Dr. Martin Luther King, Jr. Holiday Commission

RE: 2017 MLK Essay Contest - An Opportunity for Your Students

We are pleased to announce our 2017 Essay Contest!!! Please assist us in informing and encouraging Students (6th - 8th and 9th - 11th grades) to participate in the celebration by entering the contest. Our theme is:

""We must learn to live together as brothers or perish together as fools."
---Martin Luther King, Jr. - 1964

Monetary awards and certificates will be presented to the **First** (\$500), **Second** (\$350), and **Third Place** (\$150) winners at the Luncheon.

ALL ENTRANTS WILL RECEIVE A FREE PIZZA



Please ensure that contest participants strictly adhere to the following criteria:

- 1. Parental Permission Slip must be completed for each contestant
- 2. Essays must be typed (double spaced) or printed neatly in black ink
- 3. Essay length should not exceed 300 words.
- 4. Essays should speak to the theme
- 5. Essays presented using creative language styles are acceptable (i.e. poetry)
- 6. Submission Deadline Date is December 2, 2016 (Postmarked)
- 7. One copy of the **Parental permission slip** and **Essay** should be submitted to:

MLK Holiday Commission Attn: Essay Contest P.O. Box 24112 Lansing, Michigan 48909-4112

8. Please e-mail **awinston@cinnaire.com** if you have questions.



Greater Lansing Area Dr. Martin Luther King, Jr. Holiday Commission

2017 Essay Contest Permission Slip

I hanahar anant	nomician to
I hereby grant(Child's Name - Printed)	permission to
Participate in the Greater Lansing Area Dr. Martin Luther F. Contest. I understand that if my child's essay is selected as expected to read aloud his/her's composition at the MLK F. Monday, January 16, 2017. I further authorize the Commochild for marketing/promotional purposes. Additionally, I chis/her's original work and does not contain plagiarized contentry may be disqualified if his/her's entry is in violation of	a winning entry, he/she may be Ioliday Luncheon Celebration on hission to capture photos/video of my certify that my child's submission is ntent. I understand that my child's
School	Grade
Teacher/Sponsor	
Parent or Guardian (signature)	Date
Parent or Guardian's name (printed)	
Street Address	
City State 7ID	Telephone Number